

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for a Strong Gahanna				
Full Name of Contributor Zachary Guthrie	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 471 Beaverbrook	Description of Item or Service Facebook Ad	M 1	D 0	Fair Market Value 30.00
City Gahanna	State O H Zip Code 43230	Y 1	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Zachary Guthrie	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 471 Beaverbrook	Description of Item or Service Facebook Ad	M 1	D 1	Fair Market Value 15.59
City Gahanna	State O H Zip Code 43230	Y 1	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Zachary Guthrie	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 471 Beaverbrook	Description of Item or Service Facebook Ad	M 1	D 1	Fair Market Value 25.00
City Gahanna	State O H Zip Code 43230	Y 6	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M 	D 	Fair Market Value
City	State 	Y 	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M 	D 	Fair Market Value
City	State 	Y 	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M 	D 	Fair Market Value
City	State 	Y 	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M 	D 	Fair Market Value
City	State 	Y 	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M 	D 	Fair Market Value
City	State 	Y 	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]